

The Importance of Community Health Workers for CVD Prevention and Treatment

July 2018

Summary AHA position

The American Heart Association

community to facilitate access to services and improve the quality and cultural competence of service delivery...[and] also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy. " ¹¹

A CHW may be a lay health worker, community health advocate, patient navigator, *promotor de salud*, or another care provider, and may be trained and certified in a particular area, such as chronic disease management education. The World Health Organization has provided global case studies on integrating CHWs into national health systems to deliver care in countries across the world, including in Southeast Asia, sub-Saharan Africa, and Latin America.¹²

CHWs play a particularly important role in health care because they are able to gain a level of trust that may be unattainable by traditional health care workers. This attribute enables CHWs to strengthen connections among community networks, improve the cultural competency of service delivery, and improve individual and community capacity to prevent and manage disease.

According to the Centers for Disease Control and Prevention (CDC), the core roles of CHWs include:

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| Bridging the divide between communities and the health care system. | Ensuring adequate service delivery and follow-through. ¹³ |
| Providing culturally competent health education and information. | Providing counseling and social support. |
| Providing direct services and preventive health screenings. | Advocating for individuals and communities. |
| | Building individual and community capacity to address health and well-being. |

Additionally, CHWs may support chronic disease prevention and management as part of multidisciplinary teams by:

- Reaching out to individuals in a community and creating clinic-community linkages.
- Measuring and monitoring risk factors.
- Educating patients and their families about healthy behaviors and medication adherence.
- Helping patients navigate health care systems.
- Leading, supporting, and/or assessing individualized goal-setting or self-management programs.
- Providing cultural competency training to the other members of a health care team.¹⁴

provide this care specifically includes modules on health coaching for chronic conditions, and other skills to support patients in preventing and managing illness and disease.²⁶

In all states, inconsistent funding remains a significant barrier to expansion of the CHW workforce. CHWs are often funded through grants or community programs with limited funding. Currently, few states reimburse CHWs through Medicaid, private plan reimbursement, or public employee plans.; and none reimburse for CHWs' full scope of practice.

Missouri implemented a State Plan Amendment (SPA) to include reimbursement for CHWs through Medicaid; specifically for the provision of asthma preventive education and in-home environmental assessments recommended by a licensed practitioner.¹ This change allows CHWs to bill Medicaid on a fee-for-service basis.

Oregon reimburses CHWs as part of coordinated care organizations (CCOs), which were established through a Medicaid (Section 1115) waiver. Within CCOs, CHWs may provide and be reimbursed for condition-related self-management education. CHWs must be certified by the Oregon Health Authority to qualify for reimbursement, and a licensed provider must order any service they provide.²⁷ Minnesota reimburses under a similar model.²⁸

A grant program established through a 2013 pay-for-success project in South Carolina allowed primary care practices to hire CHWs and bill Medicaid for their services. Those practices that hired a CHW received a \$6000 grant from the South Carolina Department of Health and Human Services to cover the CHW's training and administrative costs. Primary care practices were also

reimbursement, reimbursement through Managed Care Contracts, and funding through other health system transformation efforts.⁷⁴

Appendix –

National CHW Associations

American Association of Community Health Workers -Durrell Fox, Co-Chair, dfoxnehec@aol.com

APHA CHW Section [www.apha.org/member groups/sections/aphasections/chw](http://www.apha.org/member_groups/sections/aphasections/chw) - Wandy Hernandez, Chair, (312) 878-7018 wandyhdz@healthconnectone.org

National Association of Community Health Representatives - www.nachr.net Ramona Dillard, CHR/CHWD, (505) 552-6652 rdillard@lagunatribe.org

National Día de la Mujer Latina Promotores Network www.diadelamujerlatina.org - Venus Ginés, (713) 798-5715, or toll-free, (877) 518-

[database/2014/07/09/14/19/support-for-community-health-workers-to-increase-health-access-and-to-reduce-health-inequities](https://www.nashp.org/state-community-health-worker-models/)

²¹ State Community Health Worker Models. *National Academy for State Health Policy*. Aug 2017. At:

<https://nashp.org/state-community-health-worker-models/>

²² CHWs and Team Based Care. *Arizona Department of Health Services*. At:

<https://www.azdhs.gov/prevention/tobacco-chronic-disease/community-health-workers/index.php#chws-team-care>

²³ New Mexico SB58 (2014). The Community Health Workers Act. At:

<https://www.nmlegis.gov/Sessions/14%20Regular/final/SB0058.pdf>

²⁴ CHW Scope of Work: Roles and Related Tasks. *New Mexico Department of Health Office of Community Health Workers*. At:

